

Parent Staff Organization Mini Grants Process and Rules

The new pilot Mini Grant Program supports the schools pillar of *Partnering with Parents* and families that need assistance to enhance and enrich student learning and experiences while building our PCCS community.

Thanks to the generous support of the PSO, the School Grants Taskforce has a budget of for the Mini-grants throughout the school year.

Application deadlines for the review periods are: Oct 2, January 15 and April 2.

A portion of the total funds available each year will be available during each of these periods.

APPLICATION GUIDELINES:

- ► Grants up to \$2,500 may be requested by any individual who is a member of the PCCS Parent Community through the duration of the school year.
- Applicants may submit one grant request per evaluation period.
- Applicants are encouraged to attach to the grant request form documentation to support the amount of the requested grant if such documentation is available.
- Applicants should indicate whether the grant request is time sensitive. Applicants should also indicate whether the activity could proceed with partial funding if funding is not granted at the requested level.
- ▶ Grant request forms will be approved and signed by the Executive Director after they have been vetted through the School Grants Taskforce. The PSO will not be involved nor responsible for accepting or denying the grant applications.
- Note Taskforce is not inclined to approve grant requests for materials or outings where it would be reasonable to ask the students' parents to pay, but they might be able to subsidize the cost for individual students in cases where payment would be a financial hardship for the student's family.
- ▶ Grant recipients should be prepared to provide detailed information to the Taskforce about the benefits of the grant and how the benefits can be shared or replicated within the PCCS community, if applicable.
- Grant recipients will have to provide to the Taskforce with either the name of a third party organization to whom the grant check should be issued or, if the grant recipient is requesting that the check be issued directly to him or her as a reimbursement, a copy of an invoice indicating that the recipient has already paid for the approved materials.



Grant Proposals Scheduling and Submission

- 1. Intended Grant Proposals Deadlines: **October 2 January 15 April 2** (Based on funding available).
- 2. All grants are due **by 3pm** on the grant due date.
- 3. Grants applications are to be submitted via email only to: psominigrants@pccharterschool.org

Proposals and Grants

Mini Grant funding criteria funding criteria:

- Relevance to curriculum, school and mission.
- Benefit to students or families
- ▶ Demonstrated need
- Amount requested

All current members of the PCCS community are eligible to submit a grant request.

Each grant must be approved by the PCCS Grant Taskforce.

It is possible that some grants will not be approved. The reasons for non-approval of a grant may include the amount of the grant request, supplanting of School responsibility, and overlapping with other School programs. Rejected grants can be resubmitted if rewritten.

Purchasing, Reimbursement, Failure to use award

- ➤ The list of approved grants will be given to the Business Office for fulfillment of the grant allocations and/or cost reimbursements.
- ▲ If a grant (or a portion of the grant) is not used within the cycle of the grant period, then the unused grant funding will revert to the use of the PSO. Prior approval to extend these deadlines is available and should be indicated on the grant application.



PSO Mini Grant Application

INSTRUCTIONS: Please provide all information and signatures prior to submission of the application. Grants applications can be submitted via email only to: psominigrants@pccharterschool.org

| 1. | Applicant Name: | |
|----|---|--|
| 2. | Email and Phone: | |
| 3. | Total Amount Requested:applicable). | Please include shipping, handling, and taxes (if |
| 4. | Minimum partial funding request (is there a minimum amount that would be helpful?): | |
| 5. | Provide a brief description of how this assistance will help your meet your most current need(s) to enhance and enrich student learning and experiences and/or build community. Please feel free to attach additional information as necessary: | |
| | | |
| 6. | Date by which funds are needed. | |
| 7. | | ou would like to share and/or submit additional Please feel free to attach that information with your |
| | | |
| | | |
| | | |
| Вį | y signing this application, the applica | ant agrees to abide by the rules outlined above. |
| Aı | pplicant's Signature: | |
| Pr | rint Name: | Date: |



| For PCCS Internal use. | | | |
|---|----------------|--|--|
| Recording: Date Received: | Date Reviewed: | | |
| Processing: Returned for more information: Yes | Date Returned: | | |
| Taskforce Decision: Amount Approved: | Date: | | |
| Denied Reason: | | | |
| Executive Director: | | | |